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Strader et al.

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(54) **METHOD AND SYSTEM FOR GENERATING
TRANSCRIPTS OF PATIENT-HEALTHCARE
PROVIDER CONVERSATIONS**

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patent is extended or adjusted under 35
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(2020.01); **G06F 40/30** (2020.01); **G10L 15/26**
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10/20 (2018.01)

(58) **Field of Classification Search**

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See application file for complete search history.

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(57) **ABSTRACT**

A method and workstation for generating a transcript of a conversation between a patient and a healthcare practitioner is disclosed. A workstation is provided with a tool for rendering of an audio recording of the conversation and generating a display of a transcript of the audio recording using a speech-to-text engine, thereby enabling inspection of the accuracy of conversion of speech to text. A tool is provided for scrolling through the transcript and rendering the portion of the audio according to the position of the scrolling. There is a highlighting in the transcript of words or phrases spoken by the patient relating to symptoms, medications or other medically relevant concepts. Additionally, there is provided a set of transcript supplement tools enabling editing of specific portions of the transcript based on the content of the corresponding portion of audio recording.

15 Claims, 10 Drawing Sheets

802

306

806

210

804

314

≡ Cecelia Smith

PATIENT INSTRUCTIONS CHART NOTE TRANSCRIPT

NEW INTAKE

pyrexia

DR: Okay, I'd like to take a look at the swelling. I'll have Sarah get you a gown and I'll be back shortly. Do you have any questions before I step out?

PT: um...pretty normal i guess. Mostly just the pain and swelling for a couple of days now.

DR: What about bowel movements? Any pain or anything else out of the norm?

PT: No, no fevers or anything like that.

DR: All right. We'll get you checked out and see what's causing the pain. Stay here and Sarah will be right with you.

PT: Thanks.

MA: Hi Sarah, Can I come in?

HISTORY OF PRESENT ILLNESS

Ms Smith is a 43-year old woman with past medical history that includes a pituitary cyst. This was apparently noninvasive when she was 18. Last July she presented with more pain in this area. On exam it was apparently unclear if there was a recurrence. She was put on a course of Keflex and everything resolved.

She presents to walk-in today saying that same thing has happened. She has had a couple days of non-associated swelling in this area. No fevers. Mild pain. Bowel movements are fine.

PHYSICAL EXAMINATION

BP 122/74

Abdomine: In the upper aspect of the gluteal cleft there were several scars from prior surgery. This area was mildly indurated. There was absolutely no erythema or fluctuance and it was not tender at all. No drainage.